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FOR MSED Mail Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

JAN 0.8 2008

Washington, DC 103

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL									
OMB Number: 3235-0076									
Expires: April 30,200 Estimated average burden									
Estimated average burden									
hours per re									

SEC USE ONLY								
Prefix	Serial							
DATE RE	CEIVED							
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UNIFORM DIMITED OFFERING EXEM	THON
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	4
6.25% Senior Secured Convertibe Note Due December 21, 2010, Common Stock, and Wa Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing: New Filing Amendment	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	LAPRON CONCLUENCE CONTRACTOR ASSOCIATION RECOGNISTICS
A. BASIC IDENTIFICATION DATA	
. Enter the information requested about the :ssuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08020892
Broadcast International, Inc.	20220032
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
7050 Union Park Avenue, #600, Salt Lake City, Utah 84047	801-722-0400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Provider of video-powered broadcast solutions, including IP, and digital satellite, Internet str distributions.	eaming and other types of wired/wireless netv
ype of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	PROCESSED
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIA
ENERAL INSTRUCTIONS	WOOKL
ederal: Tho Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D c 7d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
Then To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by thich it is due, on the date it was mailed by United States registered or certified mail to that address.	
There To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 201	549.
opies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually notocopies of the manually signed copy or bear typed or printed signatures.	
formation Required: A new filing must contain all information requested. Amendments need only reporter to, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
ling Fee: There is no federal filing fee.	
ate: nis notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa LOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S e to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for company this form. This notice shall be filed in the appropriate states in accordance with state law. is notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unlessilling of a federal notice.	

	Transfer of the second	. 15/54	A: BASIC ID	enți	IFICATION DATA			· ຈັ _{ສໄປ} າ	14 4 5 5 1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. Enter the information	requested for the fe	ol owin	3:							-
 Each promoter of 	the issuer, if the i	ssuer ha	as been organized v	vithin	the past five years;					
Each beneficial or	wner having the po	wer to v	ote or dispose, or di	irect tl	he vote or disposition	of, 10	% or more	of a cla	ss of equity securities	of the issue
 Each executive of 	fficer and director	oi corpo	orate issuers and of	corp	orate general and ma	maginş	g partners (of partn	ership issuers; and	
 Each general and 	managing partner	o:i partr	ership issuers.							
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	V	Executive Officer	Ø	Director		General and/or Managing Partner	
Full Name (Last name first, Tiede, Rodney M.	if individual)	_			, - u					
Business or Residence Addr	ess (Number and	i Street,	City, State, Zip C	ode)						
7050 Union Park Avenu	•		• • •	,						
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, Benson, Reed L.	if individual)		,					•		
Business or Residence Addr	ess (Number and	Street,	City, State, Zip Co	ode)						
7050 Union Park Avenue	, #600, Salt Lak	e City,	Utah 84047							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner	· · · · ·
Full Name (Last name first, Davidson, William H.	if individual)					-				
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	ode)						-
7050 Union Park Avenue	, #600, Salt Lak	e City,	Utah 84047							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner	
Full Name (Last name first, i	if individual)									
Cochran, Kirby D.										
Business or Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)						
7050 Union Park Avenue	e, #600, Salt Lak	e City	, Utah 84047							
Check Box(es) that Apply:	Promoter	<u> </u>	Beneficial Owner		Bxecutive Officer	Z	Director		General and/or Managing Partner	
Full Name (Last name first, i Solomon, James E.	f individual)						•			
Business or Residence Addre 7050 Union Park Avenue	•	-	City, State, Zip Co Utah 84047	de)					·	
Check Box(es) that Apply:	Promoter	E	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner	<u>"-</u>
full Name (Last name first, i Boyd, William	f individual)								,	
Business or Residence Addre 7050 Union Park Avenue	•		City, State, Zip Co Utah 84047	de)					·	
Check Box(es) that Apply:	Promoter	E	eneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner	
full Name (Last name first, if Benowitz, Richard	f individual)		-		 					
Business or Residence Addres	s (Number and	Street, C	City, State, Zip Coo	de)						
050 Union Park Avenue,	#600, Salt Lake	City.	Utah 84047							

		1			B	INFORMA	LIÓN ABÓ	UŢ ŎŔŔĔŖ	INĠ	,	*****		7 6 X
1.	Has the	issper sold	d or does ti	he issuer i	ntend to so	ell, to non-	accredited	investors i	n this offe	ring?		Yes 	No Æ
••	11000		-, 0. 0						under UL			-	
2.	What is	the minim	um investm				•	• -				\$15,	00.000,000
												Yes	No
													Z
	commiss If a perso or states,	ion or sim on to be lis list the na	ilar remune: ted is an ass	ration for: sociated pe roker or d	solicitation erson or ag ealer. If m	n of purcha: ent of a bro ore than fiv	sers in cont ker or deal /e (5) perso	nection with er registere ons to be lis	n sales of se ed with the l ted are asse	curities in SEC and/o	directly, any the offering. r with a state sons of such	:	
	•	ast name I Markets	first, if indi Corp.	vidual)	<u> </u>								
			Address (N	umber and	d Street, C	ity, State,	Zip Code)	<u> </u>		• • • • • • • • • • • • • • • • • • • •			-
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N/A													
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ι	<u>KI</u>		וענ	[IN]	(TV)		_ <u> </u>	(VA)	(MV)	<u>[¥¥ ¥ </u>]	(41)	77 1	[110]
Full 1	Name (L	ast name f	īrst, if indi	vidual)						····			
Busir	ness or F	Residence	Address (N	umber ım	d Street, C	ity, State,	Zip Code)			 ;	. <u></u> .		· -
Name	of Asso	ciated Bro	oker or Dea	ler				<u></u>			<u></u> ,	 -	
States	s in Whic	h Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "	All States'	or check in	ndividual	States)					•••••	***************************************	☐ All	States
Γ	AL	[ĀK]	AZ	AR	CA	CO	CT	DE	DC	[FL]	GA	[III]	ID
Ē	IL	N	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
Ū	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full N	Vame (La	st name f	irst, if indiv	vidual)		.							
Ruein	ess or D	esidence	Address (N	umber und	1 Street C	ity State '	Zin Code)	.					
					i sireer, c	ity, State, 2	zip Code)						
Name	of Asso	ciated Bro	ker or Deal	er									
States	in Whic	h Person l	Listed Has	Solicited (or Intends	to Solicit I	Purchasers		,	-			
(6	Check "A	ali States"	or check in	ndividual	States)	***************************************				*************		☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	M	ĪĀ	KS	KY	LA	ME	MD	MA	MI		MS	MO
		NE	NV	NH	[N]	NM	NY	NC	ND	ЮH		OR	PA
	ŔĬ	SC	SD	TN	TX	UT	∇T	VA	WA	WV	WI	WY	PR

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Aiready Aggregate Sold Offering Price Type of Security s 15,000,000.00 15,000,000.00 Debt 0.00 Equity Common Preferred 0.00 0.00 0.00 Other (Specify 15,000,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors 15,000,000.00 Accredited Investors **\$_**0.00 s 15,000,000.00 Total (for filings under Rule 504 only) 1 Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Dollar Amount Type of Sold Type of Offering Security Rule 505 Regulation A_ Rule 504 _______ \$ 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 50.00 Transfer Agent's Fees \$ 0.00 Printing and Engraving Costs 125,000.00 Legal Fees 0.00 Accounting Fees 0.00 Engineering Fees 1,050,000.00 Sales Commissions (specify finders' fees separately)......

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Other Expenses (identify)

Total

0.00

1,175,050.00

ક	C OFFERING, PIL	ce, number of investors, expenses an	D USE OF PROCEEDS	
	and total expenses furnished in response to	egate offering price given in response to Part C—Part C—Question 4.a. This difference is the "ac	ljusted gross	\$13,824,950.00
5.	each of the purposes shown. If the anio	d gross proceed to the issuer used or proposed to unt for any purpose is not known, furnish an e he total of the payments listed must equal the aduse to Part C — Question 4.b above.	stimate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			\$ 937,500.00
				s 0.00
	Purchase rental or leasing and installati			Z \$ 250,000.00
	Construction or leasing of plant building	gs and facilities	s_0.00	s 0.00
	Acquisition of other businesses (including offering that may be used in exchange for	ng the value of securities involved in this		_ 🗆 \$_0.00
	Repayment of indebtedness		\$ 0.00	\$_0.00
	Working capital			/ \$ 12,637,450.00
	Other (specify):		\$_0.00	\$_0.00
				\$_0.00
	Column Totals		. \$ <u>0.00</u>	<u> </u>
	Total Payments Listed (column totals ad	ded)	<u>s</u> 1	3,824,950.00
9.7	大百十二年 一年 一十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	D. FEDERAL SIGNATURE		
ign	ature constitutes an undertaking by the iss	ned by the undersigned duly authorized person. I uer to furnish to the U.S. Securities and Exchan non-accredited investor pursuant to paragraph	ige Commission, upon writte	ale 505, the following en request of its staff,
ssu	er (Print or Type)	Signature	Date	
	adcast International, Inc.	Korda hum	January 7, 2008	3
	e of Signer (Print or Type) dy Turner	Title of Signer (Print or Type) Vice President of Finance		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	λ,	, · · · · · · · · · · · · · · · · · · ·
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes l	No X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULCE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Sismodure /	Date
Broadcast International, Inc.	Karly Kurs	January 7, 2008
Name (Print or Type)	Title (Print or Type)	
Randy Turner	Vice President of Finance	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		on the second	Ann of the second	Ăl	APPENDIX				
1	Intend to non-a investor	2 d to sell accredited as in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	. Type of investor and amount purchased in State (Part C-Item 2)				under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of to sell and ag credited offering in State offered in			4 Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No			Number of Accredited Investors	Accredited Non-Accredited				No	
МО											
МТ											
NE											
NV					,						
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NM			!	•							
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7	APPENDIX												
1	to non-a	i to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)								
State WY PR	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No No				